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## \*BIBDATASHEET\*

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 08/923,477 09/04/1997 PAT 6,106,301  
 which claims benefit of 60/025,433 09/04/1996  
 and claims benefit of 60/072,672 01/28/1998  
 and claims benefit of 60/105,661 10/26/1998  
 and claims benefit of 60/116,545 01/21/1999

*yes J2H*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 02/10/1999

\*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>J2H</i>	STATE OR COUNTRY VA	SHEETS DRAWING 14	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 4
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## TITLE

## INTERFACE DEVICE AND METHOD FOR INTERFACING INSTRUMENTS TO MEDICAL PROCEDURE SIMULATION SYSTEMS

<p>FILING FEE RECEIVED 1573</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees ( Filing )</p> <p><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</p> <p><input type="checkbox"/> 1.18 Fees ( Issue )</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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